JUL 3 0 2014

510(k) Summary

Date Prepared:

June 6, 2014

Company:

Surgical Specialties Corporation

100 Dennis Dr.

Reading, PA 19606

Contact:

Kirsten Stowell Franco

Sr. Regulatory Affairs Manager Phone: 610-404-3367

Phone: Fax:

610-404-3924

Email:

kstowell@surgicalspecialties.com

Device trade name:

QuillTM MonodermTM Knotless Tissue-Closure Device (PGA-

PCL), Variable Loop Design

Device Common Name:

Absorbable Poly(glycolide/I-lactide) Surgical Suture

Device classification:

Suture, Absorbable, Synthetic, Polyglycolic Acid

Product code, GAM 21 CFR 878.4493

Class II

Legally marketed device to which the device is substantially equivalent: K122898:

QuillTM MonodermTM Knotless Tissue-Closure

Device, Variable Loop Design, Size -0-

K123409:

QuillTM MonodermTM Knotless Tissue-Closure

Device, Variable Loop Design, Size 2-0

K123836:

QuillTM MonodermTM Knotless Tissue-Closure

Device, Variable Loop Design, Size 1 & 3-0

Description of the device:

The QuillTM MonodermTM Knotless Tissue-Closure Device, Variable Loop Design is a sterile, synthetic absorbable tissue-closure device that is intended for use in the closure of soft tissue. It is comprised of a copolymer of glycolide and e-caprolactone, undyed, or dyed with D&C Violet No. 2. The device is designed with small uni-directional barbs along the long axis of the suture monofilament which contains a welded primary loop and secondary loop design at the distal end. It is available in diameter. Sizes 1 to 4-0, in various lengths affixed to various needle types.

Indications for Use:

QuillTM MONODERMTM device is indicated for use in soft tissue approximation where the use of absorbable sutures is appropriate.

Substantial Equivalence:

The proposed additional diameter sizes, Size 4-0, of the QuillTM MonodermTM Knotless Tissue-Closure Device, Variable Loop Design product line have the same material, design, intended use and technological characteristics as the predicate device. The only difference between the proposed and predicate device is the suture diameter.

Performance tests:

Non-clinical laboratory performance testing was conducted to confirm that the QuillTM MonodermTM Knotless Tissue-Closure Device, Variable Loop Design conforms to the USP monograph for absorbable sutures (as applicable). This testing was performed in accordance with FDA's Class II Special Controls Guidance Document: Surgical Sutures, Issued June 3, 2003. Additional performance testing was conducted in order to demonstrate substantial equivalence to the predicate device including *in vitro* post-hydrolysis tensile testing and *in vivo* resorption testing.

The results of this testing demonstrates that the QuillTM MonodermTM Knotless Tissue-Closure Device, Variable Loop Design is substantially equivalent to the predicate device.



Food and Drug Administration 10903 New Hampshire Avenue Document Control Center – WO66-G609 Silver Spring, MD 20993-0002

July 30, 2014

Surgical Specialities Corporation Ms. Kirsten Stowell Franco Senior Regulatory Affairs Manager 100 Dennis Drive Reading, Pennsylvania 19606

Re: K141778

Trade/Device Name: Quill[™] MONODERM[™] Knotless Tissue-Closure

Device (PGA-PCL), Variable Loop Design Regulation Number: 21 CFR 878.4493

Regulation Name: Absorbable poly(glycolide/l-lactide) surgical suture

Regulatory Class: Class II Product Code: GAM Dated: June 6, 2014 Received: July 2, 2014

Dear Ms. Franco:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration. Please note: CDRH does not evaluate information related to contract liability warranties. We remind you; however, that device labeling must be truthful and not misleading.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the Federal Register.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Part 801); medical device reporting (reporting of medical

device-related adverse events) (21 CFR 803); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please contact the Division of Industry and Consumer Education at its toll-free number (800) 638-2041 or (301) 796-7100 or at its Internet address

http://www.fda.gov/MedicalDevices/ResourcesforYou/Industry/default.htm. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21CFR Part 807.97). For questions regarding the reporting of adverse events under the MDR regulation (21 CFR Part 803), please go to

http://www.fda.gov/MedicalDevices/Safety/ReportaProblem/default.htm for the CDRH's Office of Surveillance and Biometrics/Division of Postmarket Surveillance.

You may obtain other general information on your responsibilities under the Act from the Division of Industry and Consumer Education at its toll-free number (800) 638-2041 or (301) 796-7100 or at its Internet address

http://www.fda.gov/MedicalDevices/ResourcesforYou/Industry/default.htm.

Sincerely yours,

David Krause -S

for Binita S. Ashar, M.D., M.B.A., F.A.C.S.
Director
Division of Surgical Devices
Office of Device Evaluation
Center for Devices and
Radiological Health

Enclosure

DEPARTMENT OF HEALTH AND HUMAN SERVICES Food and Drug Administration

Indications for Use

Form Approved: OMB No. 0910-0120 Expiration Date: January 31, 2017 See PRA Statement on last page.

10(k) Number (if known)	
K141778	
Device Name DuilI™ MONODERM™ Knotless Tissue-Closture Device (PGA-PCI	L), Variable Loop Design
ndications for Use (Describe) Quill TM MONODERM TM Knotless Tissue-Closure Device is indicated attures is appropriate.	I for use in soft tissue approximation where the use of absorbable
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ype of Use (Salect one or note, as applicable) [X] Prescription Use (Part 21 CFR 801 Subpart D)	Over-The-Counter Use (21 CFR 801 Subpart C)
PLEASE DO NOT WRITE BELOW THIS LINE - CC	ONTINUE ON A SEPARATE PAGE IF NEEDED.
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Peter L. Hudson -S	
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